•			PTO/SB/01. 02	\$ 04 COMBINED (08-03) AW (10
	DECLARATION/			507US .
POWER OF	ATTORNEY OR DESIGN PLICATION	First Named Inv	entor: Hirokaz	u Yamasaki et al.
ATENT AP			COMPLETE IF KNOWN	
ATENT APPLICATION		Application Numb	ber.	
	Submitted Submitted after Initial Declaration With Initial Filing (surcharge (37 CFR 1.67)	al Filing Date:		
With Initial Filing (sur		Art Unit:	· · · · · · · · · · · · · · · · · · ·	
(37 CFR 1.63) required)		Examiner Name:		
ught on the invention entitled: MOTOR CONTROLLER		,		
e specification of which is attached hereto	(Title	e of the Invention)		
OR				
was filed on (MM/DD/YYY 10/781,203	y) 02/18/2004	_ as United States Appli	cation or PCT Internation	onal Application Number
nd was amended on (MM/DD/YYY entified specification, including the				he contents of the above
acknowledge the duty to disclose in oplications, material information whing date of the continuation-in-part	ich became available betwee			
nereby claim foreign priority benefit eeder's rights certificate(s), or 365 America, listed below and have al ghts certificate(s), or any PCT inter	(a) of any PCT international a so identified below, by checking	ipplication which designating the box, any foreign a	ited at least one country application for patent, in	other than the United Staventor's or plant breeder's
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attach Yes No
003-197563	Japan	07/16/2003		
003-197564	Japan	07/16/2003		
2003-197565	Japan	07/16/2003		

07/16/2003

Japan

 \square Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

2003-197566

Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

I hereby appoint:								
Practitioners at Customer Number <u>23122</u>								
OR								
	Practitioner(s) named below:			•				
	Name			Registration Number				
		W-1100 W-		<u> </u>				
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Direct all correspondence to: Practitioners Customer Number listed above; OR								
	. -	Correspondence Addres						
			3 50.00					
Nam	ne:							
Add	ress:			<u> </u>				
City	City: State:			Zip:				
Cou	ntry:	Telephone:		Fax:				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
Na	me of Sole or First Inve	entor: A Petition has been filed for this unsigned inventor.						
	Given Name (first and middle (if any))			Family Name or Surname				
Hirokazu		YAMASAKI						
Inventor's Signature Nowkazu Yamasaki Date: May 25, 2004								
Res	idence: City: Osaka	State:	Country: Japan		Citizenship: Japanese			
Mailing Address: 5-18-40-511, Shiginonishi, Joto-ku, Osaka-shi,								
Mailing Address:								
City	/: Osaka	State:	Zip: 536-0014 Country: Japan					
Additional inventors are listed on the next page.								

Declaration/Power Of Attorney for Utility or Design Patent Application (continued)

Name of Second Inventor:		A Petition has been filed for this unsigned inventor.					
Given Name (first and middle (if any))		Family Name or Surname					
Koji	÷	KAMEDA					
Inventor's Signature Koji	K	da Date: May 25, 2004					
Residence: City: Osaka	State:	Country: Japan Citizenship: Japanese					
Mailing Address: 6-E2-1207, Sotojima-cho, Moriguchi-shi,							
Mailing Address:							
City: Osaka	State:	Zip: 570-0096 Country: Japan					
Name of Third Inventor:		A Petition has been filed for this unsigned inventor.					
Given Name (first and middle (if any))		Family Name or Surname					
Inventor's Signature			Date:				
Residence: City:	State:	Country: Citizenship:					
Mailing Address:							
Mailing Address:							
City:	State:	Zip: Country:					
Name of Fourth Inventor:		A Petition has been filed for this unsigned inventor.					
Given Name (first and middle (if any))		Family Name or Surname					
Inventor's Signature			Date:				
Residence: City:	State:	Country:	Citizenship:				
Mailing Address:							
Mailing Address:							
City:	State:	Zip: Country:					
Additional inventors are listed on Supplemental Sheet(s).							